

2025-2026 North Carolina Pre-Kindergarten Application

NC Pre-Kindergarten is a free, high-quality North Carolina funded program. Your child's regular attendance will strengthen classroom, pre-literacy, math, and social skills in a child-focused learning environment.

Eligibility details AND frequently asked questions for parents: www.theAllianceforChildren.org under NC Pre-K!

Turn in copies of all paperwork listed below:

_____ Complete, sign, & date this application form _____ Complete and return the site options form

(If legal guardian, custodian, or foster provide legal/DSS documents with the application)

_____ A Copy of Child's Birth Certificate or copy of child's passport

_____ Two copies of Proofs of Residency with a parent name and current Union County address

(Examples: recent utility bill, car or home insurance card, driver's license or registration, lease or mortgage statement)

_____ Proof of household income Choose from these options for working parent/stepparents/guardians/custodians:

A month's worth of consecutive recent check stubs **OR** If same job for **all of 2024, provide a 2024 W-2 or 2024 tax return**. If **new** job, job offer letter from employer. **OR** copy of child's recent Medicaid **eligibility letter** **OR** copy of family's current Food and Nutrition services **eligibility letter**. Include documents for: alimony, SSA, SSDI, child support, disability, unemployment for mom and dad/stepmom/stepdad.

Child's Information

Please complete each line and print clearly

Child's

First Name:

Middle

Last

Address:

Street

City

State

Zip Code

Age: _____

Child must be four (4) on 8/31/25

Child's Birthday

____/____/____
Month Day Year

☐ Male

☐ Female

Language child speaks at home and with friends:

Race: (check ALL that apply): ☐ Black/African American ☐ White or Latino/Hispanic ☐ Asian ☐ American Indian/Alaska Native ☐ Native Hawaiian/Pacific Islander

(Check One) ☐ Hispanic/Latino ☐ Non-Hispanic/Latino (Check One) Is the CHILD a US citizen? ☐ Yes ☐ No

Does this child have a parent who is actively serving in the military OR disabled during military service? ☐ No ☐ Yes

(include a copy of military LES or disability benefit letter with all other required documents)

Child Lives With: Check all that apply: ☐ Both Parents ☐ Mother/Stepmother ☐ Father/Stepfather ☐ Other non-relative _____

☐ Foster Parent * ☐ Legal Guardian or Legal Custodian* (*attach copies of legal documents) ☐ Other/ Relative _____

Did the child attend childcare at 3 years of age? ☐ No ☐ Yes I receive or applied for childcare voucher at DSS ☐ No (to apply call 704-706-9494) ☐ Yes

****Who cares for this child during the day now?** List childcare site or caregiver here: _____

Does your child have a chronic health condition diagnosed by a doctor? ☐ No ☐ Yes* condition _____ School Medication Plan? ☐ No ☐ Yes*

Does your child have an active Individual Education Plan (IEP)? ☐ No ☐ Yes* (* For all YES answers, include a copy of medical support plan or IEP with application packet)

Does your child receive support services **now** for speech, a special need or disability? ☐ No ☐ Yes _____speech _____OT _____PT Other _____

Where? UCPS or private provider (list) _____ Continue all services, NC Pre-K does not provide support services.)

Do you have a concern about your child's development (learning, speech, hearing, or behavior)? ☐ No ☐ Yes Concern? * _____

Call the UCPS EC Preschool Assessment Center at 704-282-6259 to inquire about assessments and support services for children ages 3 or 4.

Complete this section for family members who reside with the child.

Print clearly please

Print Full Name of Female Parent or Legal Caregiver

☐ Child's Mother ☐ Female Legal Guardian or Custodian

☐ Stepmother (legally married to child's father)

Full Address: (Street, City, State, Zip Code)

☐ Same as child

Own _____

Rent _____

Live with family member _____

Other _____

BEST Phone Number

Email:

Work #

Check ALL that apply:

☐ Employed # hours per week? _____

☐ Unemployed ☐ Looking for work ☐ Attending College

☐ Receive unemployment income

☐ In High School/GED program ☐ In Job Training ☐ Other _____

<input type="checkbox"/> Father <input type="checkbox"/> Stepfather Full Name of Male Parent or Legal Caregiver <input type="checkbox"/> Male Legal Guardian/custodian (Legally married to child's mom)	Full Address: (Street, City, State, Zip Code) <input type="checkbox"/> Same address as child
Best Phone #: _____	Father's Email: _____
<input type="checkbox"/> Employed How many hours per week? _____ Employer _____	Father/Stepfather/ Male Caregiver: Check all that apply: <input type="checkbox"/> Unemployed <input type="checkbox"/> Looking for work <input type="checkbox"/> Attending College <input type="checkbox"/> In Job Training <input type="checkbox"/> In High School/GED program
<input type="checkbox"/> Receive unemployment included as income/provide benefit letter with child's application packet	

List parents, step-parents, legal guardians, brothers*, sisters*, half-brothers* and sisters*, step brothers* and sisters* living in child's home.

Clearly Print - First and Last Name	Relationship to the Pre-K Child	Birthdate & age	List Brother or sister's school OR childcare site
1. Child:			
2.			
3.			
4.			
5.			
6.			
7.			

If more, attach list with application

Total Number of family members listed above (include Pre-K student) _____

Emergency Contact Information

List a family member for contact if parents cannot be reached in an emergency

Emergency Contact: _____		Relationship to Child: _____
Home Phone: _____	Work Phone: _____	Mobile Phone: _____

Home Language Survey

Your child will be assessed in the language you list below*. Please answer with this in mind

Language the child learned to speak?	Second language?	Most often? *
Primary language of the Mother?	Second language?	Primary/ Father?
	Second language?	

- o I give my permission for NC Pre-K staff, UCPS EC or Title 1, NC Pre-K teachers and/or classroom support staff to share documents, discuss my child's progress and needs for classroom or outside support to best serve my child.
- o I understand that this application is for possible enrollment following NC Pre-K eligibility guidelines.
- o I give permission for my child to be photographed and/or videotaped for display, scrapbook, newspaper articles, and/or posting to social media, Facebook or websites.
- o I agree that my child will attend Pre-K on time and on a regular basis. I will work as a team with my child's teachers and staff.

My signature below certifies that all information on this application and the documents I provided is accurate, true, and completed correctly.

Mother/Caregiver Signature: X _____ Date _____ I receive no income of any kind _____ Initial here

Father/Caregiver Signature: X _____ Date _____ I receive no income of any kind _____ Initial here

Complete application packets may be mailed, faxed, or returned to:



2661 W. Roosevelt Blvd., Suite A ~ Monroe NC 28110

Anytime: Drop slot at office front door

Questions: NCPRE-K@theAllianceforChildren.org

Phone: 704-226-1407, ext. 23 or 30 Fax: 704-226-1369

Read the "Frequently Asked Questions" under NC Pre-K at: <https://theallianceforchildren.org/>

Prepare now:

North Carolina law requires a child's up to date immunization (shot) records and a physical/dental exam form completed by a physician be provided by the parent **to the site** on child's first school day.

Health and dental screening forms at

www.theAllianceforChildren.org under NC Pre-K.

Note: these documents do not have to be included for the eligibility/initial application process.

You will register your child for Kindergarten in Feb. 2026. Save a copy of these health documents for registration.

Child's Name: First _____ Last _____

1. Review NC Pre-K partner site options, addresses, and NC Pre-K hours below.
 2. Questions about NC Pre-K? Visit the NC Pre-K page at www.theAllianceforChildren.org or email NCPre-K@theAllianceforChildren.org
- NC Pre-K sites (E) offer limited extended care spots before and/or after NC Pre-K hours.
 - If needed, parents arrange extended care with the site director before school begins.
 - Parents pay sites for time outside NC Pre-K hours. Call 704-706-9494 to apply for income-based assistance.
 - Parents provide transportation to and from school each day.
 - **On-time, regular attendance helps your child receive the full benefit of the NC Pre-K program.**

NC Pre-K Partner Site Options	Site Address	NC Pre-K Class Hours
A Plus Childcare & Learning Ctr. (E)	109 Camelia Dr, Monroe	7:30-2:00
Childcare Network 121 (E)	780 Sutton Place, Monroe	7:30-2:00
Childtime Indian Trail (E)	120 Business Park Dr., Indian Trail	7:30-2:00
ChildTime Monroe (E)	1714 N. Charlotte Ave, Monroe	7:30-2:00
Indian Trail Elementary* <i>note below</i>	200 Education Rd., Indian Trail	7:15-2:00
Kids R Kids	5549 Potter Rd., Matthews	7:30-2:00
LeafSpring School at Matthews	3424 Pleasant Plains Rd., Stallings	8:00-2:30
Oakboro Kid's Club (Stanly Co.) (E)	206 N. Main St, Oakboro	8:00-2:30
S.T.E.P.'s Developmental Academy	108 Indian Trail Rd., Indian Trail	7:15-2:00
Walter Bickett Education Center	501 Lancaster Ave, Monroe	7:00-1:30
Waxhaw Elementary* <i>note below</i>	1101 Old Providence Rd, Waxhaw	7:00-1:50
Weekday Children's Ministries	801 S. Hayne St, Monroe	7:30-2:00
Wingate Baptist (E)	109 E. Elm St, Wingate	7:30-2:00
Wonder Academy €	3309 Faith Church Rd., Indian Trail	8:00-2:30

NC Pre-K follows the UCPS traditional calendar including workdays, breaks and holidays.

Class hours and site listings could be changed or adjusted.

*For Indian Trail and Waxhaw Elementary sites. placement preference to children in school attendance area.

All NC Pre-K classrooms meet the same quality standards.

Map out and list three sites close to your home or work.

This information is used to place your eligible child.

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Note: You may be offered a different site due to limited class size. Due to the large number of families served in NC Pre-K, site options are not guaranteed. Take a picture of this form for your records.



NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES
Division of Child Development
and Early Education

